J1059 U

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PATENT APPLICATION TRANSMITTAL LETTER

(Small Entity)

Docket No. 78945-7 /jlo

TO THE ASSISTANT COMMISSIONER FOR PATENTS

Transmitted herewith for filing under 35 U.S.C. 111 and 37 C.F.R. 1.53 is the patent application of:

SUDHAKAR GANTI, BYOUNG-JOON LEE and BARRY MARK

For: CASCADED POLICING SYSTEMS AND METHODS

cc: *includes \$40.00 assignment recordal fee

09/893584

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Enclosed are:								
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\boxtimes			☐ Unsigned.	• •				
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☐ Preliminary Amendment								
☐ Verified Statement(s) to Establish Small Entity Status Under 37 C.F.R. 1.9 and 1.27.								
X Other: 1 Assignment, AR card								
CLAIMS AS FILED For #Filed #Allowed #Extra Rate Fee								
	For	#Filed	#Allowed	#Extra	Rate		Fee	
							\$0.00	
=======================================		17	- 20 =	0	× \$9.00		\$0.00	
Indep. Claims		5	- 3 =	2	x \$40.00		\$80.00	
Multiple Dependent Claims (check if applicable) BASIC FEE \$355.00 TOTAL FILING FEE \$435.00 A check in the amount of \$475.00 to cover the filing fee is enclosed.								
		\$355.00						
TOTAL FILING FEE							\$435.00	
 A check in the amount of \$475.00 to cover the filing fee is enclosed. ☑ The Commissioner is hereby authorized to charge and credit Deposit Account No. 19-2550 as described below. A duplicate copy of this sheet is enclosed. ☐ Charge the amount of as filing fee. ☑ Credit any overpayment. ☑ Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17. ☐ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b). Dated: June 28, 2001 R. Allan Brett Reg. No. 40476								
	Total Mul		□ Certificate of Mailing with Express 3 sheets of □ A certified copy of a □ Declaration □ Signed. □ Power of Attorney □ Information Disclosure Statemer □ Preliminary Amendment □ Verified S □ Other: 1 Assignment, AR card □ Total Claims 17 Indep. Claims 5 Multiple Dependent Claims (check □ A check in the amount of □ Charge the amount of □ Charge the amount of □ Charge any additional fi □ Charge the issue fee sepursuant to 37 C.F.R. 1	Certificate of Mailing with Express Mail Mailing Late 3 sheets of drawings. A certified copy of a Declaration ☑ Signed. ☐ Unsigned. Power of Attorney Information Disclosure Statement Preliminary Amendment Verified Statement(s) to Es Other: 1 Assignment, AR card CLAIMS A For #Filed #Allowed Total Claims 17 - 20 = Indep. Claims 5 - 3 = Multiple Dependent Claims (check if applicable) ☑ A check in the amount of \$475.00 to complete to charge as described below. A duplicate copy of this sheet ☐ Charge the amount of ☑ Credit any overpayment. ☑ Charge any additional filing fees required ☐ Charge the issue fee set in 37 C.F.R. 1.18 pursuant to 37 C.F.R. 1.311(b).	□ Certificate of Mailing with Express Mail Mailing Label No. 3 sheets of drawings. □ A certified copy of a application. □ Declaration □ Signed. □ Unsigned. □ Power of Attorney □ Information Disclosure Statement □ Preliminary Amendment □ Verified Statement(s) to Establish Smal □ Other: 1 Assignment, AR card □ CLAIMS AS FILED □ For #Filed #Allowed #Extra □ Total Claims	□ Certificate of Mailing with Express Mail Mailing Label No. 3 sheets of drawings. □ A certified copy of a application. □ Declaration □ Signed. □ Unsigned. □ Power of Attorney □ Information Disclosure Statement □ Preliminary Amendment □ Verified Statement(s) to Establish Small Entity Status Under □ CLAIMS AS FILED For #Filed #Allowed #Extra Rate Total Claims 17 -20 = 0 x \$9.00 Indep. Claims 5 - 3 = 2 x \$40.00 Multiple Dependent Claims (check if applicable) □ TOTA □ A check in the amount of \$475.00 to cover the filing fee is enclosed. □ Charge the amount of as filing fee. □ Credit any overpayment. □ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Appursuant to 37 C.F.R. 1.311(b).	□ Certificate of Mailing with Express Mail Mailing Label No. 3 sheets of drawings. □ A certified copy of a application. □ Declaration ☑ Signed. □ Unsigned. □ Power of Attorney □ Information Disclosure Statement □ Preliminary Amendment □ Verified Statement(s) to Establish Small Entity Status Under 37 C.F.R. 1.9 ☑ Other: 1 Assignment, AR card CLAIMS AS FILED For #Filed #Allowed #Extra Rate Total Claims 17 - 20 = 0 x \$9.00 Indep. Claims 5 - 3 = 2 x \$40.00 Multiple Dependent Claims (check if applicable) □ BASIC FEE TOTAL FILING FEE ■ A check in the amount of \$475.00 to cover the filing fee is enclosed. □ The Commissioner is hereby authorized to charge and credit Deposit Account No. 19-2550 as described below. A duplicate copy of this sheet is enclosed. □ Charge the amount of as filing fee. □ Credit any overpayment. □ Charge any additional filing fees required under 37 C.F.R. 1.16 and 1.17. □ Charge the issue fee set in 37 C.F.R. 1.18 at the mailing of the Notice of Allowance, pursuant to 37 C.F.R. 1.311(b). Dated: June 28, 2001	